								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10762884					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								IALL I	ENTITY	OR		R THAN ENTITY	
T	OTAL CLAIMS	3	33					RATE	FEE	٦.	RATE	FEE	
FOR			NUMBER FILED		· NUM	BER EXTRA	BÀ	SIC FE	E 385.00	OR	BASIC FEE	<del>                                     </del>	
TOTAL CHARGEABLE CLAIMS			33 minus 20=		•	13	,	X\$ 9=	117	OR	V210		
INDEPENDENT CLAIMS			9 minus 3 =		*	G		X43=	258	1	X86=		
ΜL	JLTIPLE DEPE	NDENT CLAIM P	RESENT						1018	OR	7.00-		
* If the difference in column 1 is less than zero, enter "0" in column 2								145=	1 7 1	OR	+290=		
·								OTAL	760	OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						S	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 33	Minus	819	,	=13	×	\$ 9=	117	OR	X\$18=		
AME	Independent	. 9	Minus	***		= Q	×	43=	258	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		1	+290=		
•								TOTAL	7/1	OR	TOTAL		
(Column 1) (Column 2) (Column 3)								IT. FEE	460	OR ,	ADDIT. FEE	L	
AMENDMENT B	CLAIMS REMAINING			HIGHE		T			ADDI-	) [		ADDI-	
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	X	43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									l			
								45=		OR	+290= TOTAL	•	
								T. FEE		OR,	DOIT. FEE	<del></del>	
	`	(Column 1)		(Colum		(Column 3)				_			
AMENDMENT C	<b>`</b> .	REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<b>z</b>	XS	9=		OR	X\$18=		
	ind pendent	•	Minus	***		=	X	3=		t	X86=		
1	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	MIAL					OR			
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	+290=		
										OR A	TOTAL DOIT, FEE		
Ť	he "High st Num	ber Previously Paid	For" (Total or	independen	t) is the	highest number	found in	the app	ropriat box	in colu	ma 1.		